

Application Data Sheet

Application Information

Application number::	Unassigned
Filing Date::	10/22/03
Application Type::	Regular
Subject Matter::	Utility
Sequence Submission::	No
Title::	ENDOLUMINAL PROSTHESIS ENDOLEAK MANAGEMENT
Attorney Docket Number::	021630-004600US
Request for Early Publication::	No
Request for Non-Publication::	No
Suggested Drawing Figure::	1
Total Drawing Sheets::	10
Small Entity?::	Yes
Petition included?::	No
Secrecy Order in Parent Appl.::	No

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Michael
Middle Name::	V.
Family Name::	Chobotov
City of Residence::	Santa Rosa
State or Province of Residence::	CA
Country of Residence::	US
Street of Mailing Address::	3805 Skyfarm Drive
City of Mailing Address::	Santa Rosa
State or Province of mailing address::	CA

Country of mailing address:: US
Postal or Zip Code of mailing address:: 95404

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Robert
Middle Name:: G.
Family Name:: Whirley
City of Residence:: Santa Rosa
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 3709 Paxton Place
City of Mailing Address:: Santa Rosa
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 95404

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Customer Number:: 20350

Assignee Information

Assignee Name:: TriVascular, Inc.
Street of mailing address:: 3660 North Laughlin Road
City of mailing address:: Santa Rosa
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 95403